

IDAHO AREA ASSEMBLY HOSTING EXPENSE FORM

DISTRICT # _____ DISTRICT REPRESENTATIVE _____

DISTRICT ADDRESS _____ CITY _____

ST _____ ZIP _____ PHONE _____ EMAIL _____

EVENT _____ DATE(S) _____

Please provide copies of receipts for all costs or payment may be delayed.

COSTS:

DESCRIPTION	AMOUNT
CONVENTION ROOM COST	
CONVENTION ROOM COFFEE/TEA ETC COST	
LUNCHEON COST – NOT TO EXCEED \$25 PER ATTENDEE	
FLYER – NOT TO EXCEED \$30	
DECORATIONS – NOT TO EXCEED \$25	
COPIES	
OTHER-EXPLAIN _____	
OTHER-EXPLAIN _____	
OTHER-EXPLAIN _____	
SPEAKER – NOT TO EXCEED \$500 FOR OUT OF TOWNER	
TRAVEL – FUEL, TAXI, AIRLINE ETC	
SPEAKER GIFT – NOT TO EXCEED \$25	
HOTEL ROOM ONLY	
LUNCHEON	
MEALS – NOT TO EXCEED \$100 NO ALCOHOL OR TIPS	
REGISTRATION	
TOTAL	

Mail to: Idaho Area Treasurer or afgarea13treasurer@gmail.com
P O Box 4521
Pocatello, ID 83205-4521

DATE PAID: _____ CHECK NUMBER: _____